U.S. Petern and Treasment Office; U.S. 02PARTMENT OF COMMERCE कारकरात वर्ष की प्रश्नित का टावनाच्या का , विदेशी कि क्रिसे कार्वित्वपक्षि

PATENT APPLICATION FEE DETERMINATION RECORD Subditud for Form PTO-875 Effective December 8, 2004									Application or OCA CAMP control number		
APPLICATION AS FILED - PART I (Column 1) (Column 2) SMALL ENTITY								OR		ER THAN L ENTITY	
نينال	. FOR	. MU	NUMBER FILED		NUMBER EXTRA	RATE (8)	FEE (8)		DATE (0)		
	SIC FEE CFR 1.18(0), (b), or (c))		N/A		, N/A	N/A	150.00	1	RATE (8)	300.00	
	CFR 1 10(4, 1).	er (ml)	- N/A		N/A.	. N/A	\$260	1	N/A	\$500	
	Lawina Tion Fe CFR 1.1440. (p)		NA		! N/A	N/A	\$100		NVA	\$200	
	Val Claevs CFR 1.18(11)		· minus 20 ≖			XS 25 .		┨	YREA		
©YOZPENDENT CLAIMS ©Y OFR (1.16(N)) minus 3 -						X100 g	 	OR.	Yann	 	
APPLICATION SIZE FIEE (37 CFR 1.16(6)) If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125-for small entity) for each additional 50-sheets of fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).									7200		
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(i))						+180=			+360=		
e if the difference in column 1 is less than zero, enter "0" in column 2.						TOTAL	·		TOTAL		
	APF	LICAȚION AS	AMENI	DED - PAR	-		-				
		(Column 1)		(Column	12) (Column 3)	SMALL	ENTITY	OR		R THAN	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOUS	R PRESENT. SLY EXTRA	RATE (\$)	ADDI- TIONAL		RATE (\$)	ADDI- TIONAL	
	Total proration	· AMENDARIA	Minus	PAID FO	1	X\$ 25 _	FEE (\$)		X\$50 -	FEE (8)	
	tradopendent (37 CFR 1,1Cp))	•	Minus		=	X100 _		OR	X200	 	
	Application Size Fee (37 CFR 1.18(s))							OR	7200 a	 	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.160)					+180=		OR	+36 0=		
	•				TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE			
		(Column 1) CLAIMS	·	(Column				. 7			
AMIENDMENT B		REMAINING AFTER AMENDMENT		NUMBER PREVIOUS PAID FOR	PRESENT	RATE (\$)	ADDI- TIONAL FEE (8)		RATE (8)	ADDI- TIONAL FEE (8)	
	Total CO CFR 1.16(1))		Minus	••	#	X\$ 25 .		OR	X\$50 .	TEE (8)	
	indopondom (D) CFA 1.1CAD	o ` ' ,	Minus	***	-	X100 .		· [Y200		
	Application Size Foe (37 CFR 1.16(s))							OR 1	<u>₩</u>		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(1))					+180=		OR	+360=		
•	aa ta uu				TOTAL ADD'L FEE		ران (ا	TOTAL ADD'L FEE			
000	if the Highest N	iumber Prevlousiv	Paid For Paid For	IN THIS COM	write "0" in column 3 CE is less than 20, e E is less than 3, eni	-1 50.00	· · · · · · · · · · · · · · · · · · ·		L		

The Tighest Number Previously Paid For (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of Information is required by 97 CFR 1.16. The information is required to obtain or retain a bangit by the public which is to file (and by the ISPTO to process) an application. Confidentially is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete in State of the Complete of a State of the USPTO. Three will very depending upon the individual case. Any comments in State of this you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patient Collection, U.S. Dependment Officer, U.S. Patient (Collection 10 to 10 t